

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <i>10/539908</i>	FILING DATE					
							APPLICANT(S), ..						
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		1				51						
2		/		/			52						
3		2			/		53						
4		1			/		54						
5		1			/		55						
6		1			/		56						
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14		1			/		64						
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47					/		97						
48					/		98						
49					/		99						
50					/		100						
TOTAL IND.	1		3										
TOTAL DEP.	25		28										
TOTAL CLAIMS	26		31										